

PO Box 1360
Frankfort, KY 40602

[illegible]

Affidavit

I do hereby swear or affirm that all statements and information provided herein are true, correct and complete to the best of my knowledge and belief. Any untrue or incorrect statement knowingly made by me on this application shall constitute grounds for such disciplinary action as the Board may determine appropriate.

I agree to fully cooperate in the processing of my application. I will furnish any additional information requested. I hereby grant permission to contact listed references, supervisors, or others who, in the judgement of the Board, may provide information concerning my qualification for registration, and to divulge information contained in the application or obtained in the evaluation of my qualifications, which is necessary to independently verify my qualifications.

Signature: _____ Date: _____

BEFORE ME, the undersigned authority, on this day personally appeared _____ known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same as a warrant of the statements therein contained, of his/her own free will.

Given under my hand and seal of office the _____ day of _____, 20____

My commission expires _____
Notary Public